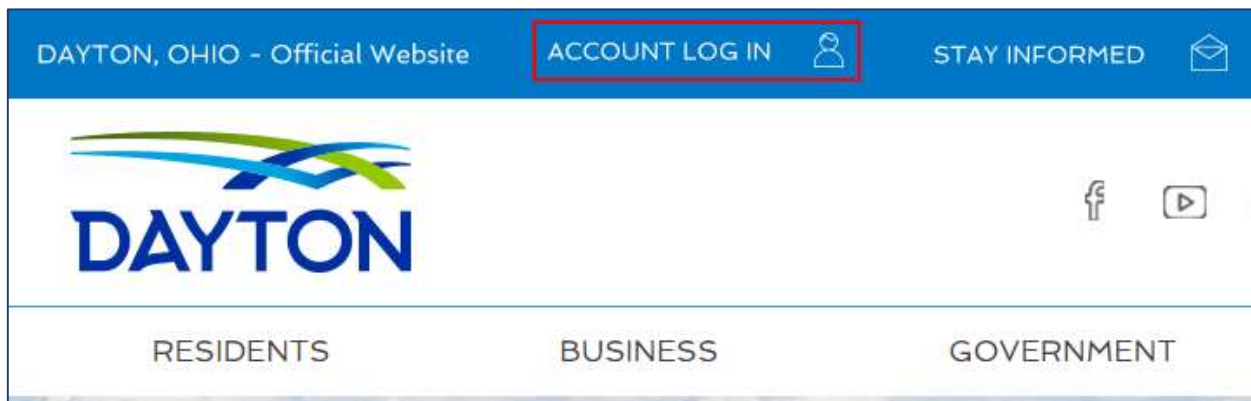


COVID – 19 American Rescue Plan Act (ARPA) Local Fiscal Recovery Funds Grant Program Application Guide

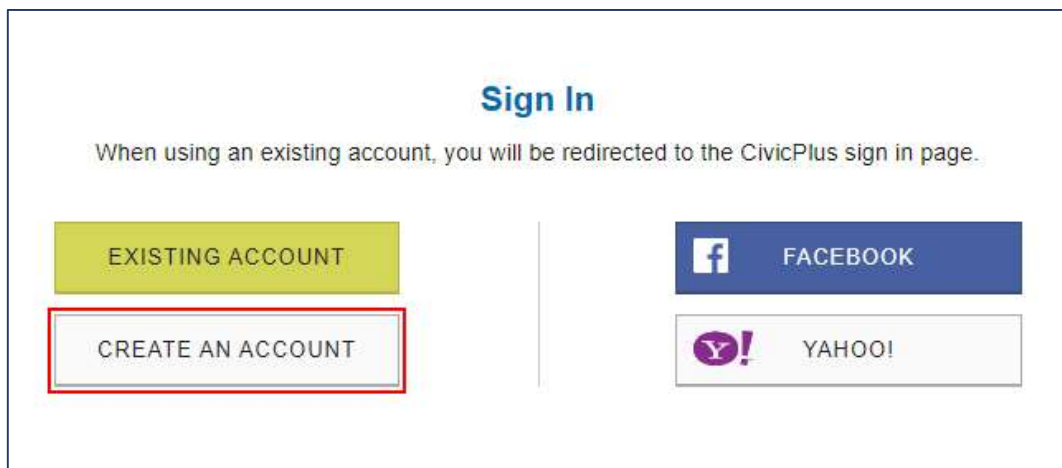
Thank you for your interest in the City of Dayton’s ARPA Notice of Funding Opportunity. There is a project application that will be utilize for both Community Investments as well as Small Business- Hospitality. You may submit an idea by selecting the Idea Box category if you do not wish to apply for a project and request funding.

Please utilize the instructions and screen shots below to assist you in your efforts to complete the application. If at any time you run into issues or have questions, please utilize the open office hours or contact us at ARPA-Application@daytonohio.gov email. The Submission ID located at the top of each application page is needed in order to identify any application that requires assistance after a successful submission.

1. Open your web browser and navigate to <https://www.daytonohio.gov>
2. Click “Account Log In” in the blue bar at the top of the website



3. If you already have a CivicPlus/Daytonohio.gov, click on **EXISTING ACCOUNT** and use your username and password to login.
 - a. If you do not have an account, you will need to click on **CREATE AN ACCOUNT** to register your account, prior to filling out the ARPA application.



- Once you are logged in, navigate to the ARPA application, and select the NOFO category. Community Award, Small Business/Hospitality Projects, or Idea Box.

NOTE: All fields with an asterisk (*) are required before submitting the application.

ARPA Category

Please select the NOFO category that best describes your proposed project:*

- ☐ Community Award: For capital or one-time expenses for projects benefiting the community that may involve single or multiple organizations.
- ☐ Small Business/Hospitality Projects: Capital projects or one-time expenses for businesses adversely impacted by or related to COVID-19 pandemic.
- ☐ Idea Box: Ideas and recommendations for use of ARPA funds submitted by individuals, non-profits, or businesses.

If you change your NOFO category selection in the middle of completing the application, please refresh the page! Failing to do so may result in a corrupt application.

- Select ARPA eligible areas
- Describe in detail how your request meets ARPA guidance outlined in the Treasury Interim Final Rule.
- Pick Yes or No if you have applied for or received funding from other Federal COVID relief funds.
 - If you pick Yes, this will give you an additional box to further explain your other funding.

Have you applied for or received other Federal COVID relief funds from any other entity?*

- ☒ Yes
- ☐ No

If you have applied for or received other Federal COVID relief funds from any other entity, please explain:*

8. Pick Organization or Individual.

Organization Information

Are you an organization or an individual?*

☒ Organization

☐ Individual

a. If you pick Organization, this will ask you to fill in information for your organization

Organization Name (as registered with IRS – W9)*

Organization name / full name

DBA Organization Name (if applicable)

DBA organization name

Date Established*

mm/dd/yyyy

Organization Street Address*

123 N. Main St.

Organization City*

Dayton

Organization State*

OH

Organization Zip*

45402

Organization Website (if applicable)

https://www.example.com

Organization Filing Status*

☐ Sole Proprietorship

☐ Partnership (LLP, LP)

☐ C-Corporation

☐ S-Corporation

☐ Limited Liability Company (LLC, LC)

☐ Non-Profit

DUNS Number

#####

Please input only numbers.

Federal EIN*

#####

Please input only numbers without a hyphen.

Has the organization or any staff representatives ever been Federally excluded or disqualified from accessing Federal Awards?*

☒ Yes

☐ No

Please make sure to fill in each field with an asterisk, as they are required.

b. If you pick Organization or Individual, this will ask you to fill in contact information.

Authorized Contact Information

First Name* Last Name* Title (if organization)

First name Last name Title

Email* Phone Number*

example@example.com (555) 555 - 5555

Address*

123 N. Main St.

City* State* Zip*

Dayton OH 45402

Red arrows point to: First Name, Last Name, Title, Email, Phone Number, Address, City, State, and Zip.

9. Select ARPA Focus Area

Choose the City Focus Area that the project best belongs (Check all that apply)*

- ☐ Neighborhoods (Definitions coming)
- ☐ Amenities
- ☐ Catalytic Projects
- ☐ Broadband
- ☐ Address Crime through the built environment
- ☐ Black/Brown Business
- ☐ Small Business

A red arrow points to the list of focus areas.

10. Describe how your project is related to COVID-19 and how ARPA funding is essential in addressing this need.

11. Provide location of your project.

12. Provide name of your project.

13. Pick one: New Project, Existing Project, or Changed Project.

14. Pick Yes or No if your project is in City's targeted Qualified Census Tract.

a. If you pick Yes, this will give you an additional box to further explain.

Is the project in or serving populations in the City's targeted Qualified Census Tracts (W, NW, Tornado damaged East)?*

☒ Yes ☐ No

If the project is in or serving populations in the City's targeted Qualified Census Tracts, please explain:*

A red arrow points to the 'Yes' radio button.

15. Pick Yes or No if your project benefits minority population that has been Disproportionally impacted by COVID-19.

a. If you pick Yes, this will give you an additional box to further explain.



Does this project benefit minority populations that have been disproportionately impacted by COVID19?*

☒ Yes
☐ No

If the project benefits minority populations that have been disproportionately impacted by COVID19, please explain.*

A large pink rectangular text box for explanation is shown below the question. A red arrow points to the left side of this box.

16. Pick Yes or No if your project reduces climate impacts and/or promotes sustainability.

a. If you pick Yes, this will give you an additional box to further explain.



Does this project reduce adverse climate impacts and/or promote sustainability?*

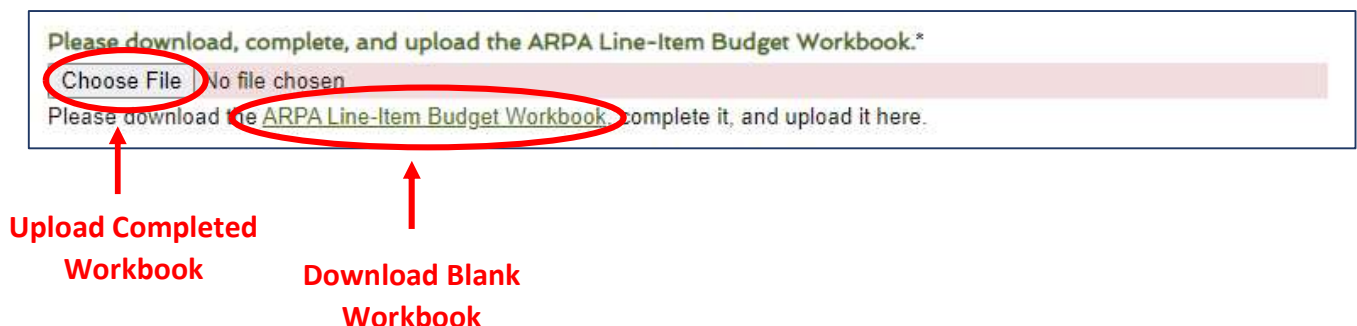
☒ Yes
☐ No

If this project reduces adverse climate impacts and/or promotes sustainability, please explain.*

A large pink rectangular text box for explanation is shown below the question. A red arrow points to the left side of this box.

17. Explain proposed completion timeline for you project.

18. Complete and upload Line-Item Budget Workbook for your project. (you must submit Line-Item Budget Workbook in order to apply).



Please download, complete, and upload the ARPA Line-Item Budget Workbook.*

Choose File No file chosen

Please download the ARPA Line-Item Budget Workbook, complete it, and upload it here.

Two red arrows point to the interface elements: one to the 'Choose File' button and another to the underlined link 'ARPA Line-Item Budget Workbook'.

Upload Completed Workbook

Download Blank Workbook

19. Provide total cost for your project from Line-Item Budget Workbook cell F11.

20. Provide the requested ARPA funding for your project from Line-Item Budget Workbook cell B11

	A	B	C	D	E	F
		Requested ARPA Funds	City/State/ Federal Funds	Private/ Organizational Funds	In-Kind Contributions	Total Project Budget
1						
2	Planning, Design, Engineering					-
3	Professional Services					-
4	Land Acquisition & Environmental					-
5	Construction & Const. Engineering					-
6	Personnel Cost					-
7	Capital Equipment					-
8	Technology					-
9	Furniture/fixtures/other assets					-
10	Other					-
11	Total Budget	-	-	-	-	-

Requested Funding

Total Project Cost

21. If you are an organization, enter the budget and upload your most current financial statement.

What is the annual organization budget (the award through Dayton ARPA grant can't exceed 50% of an organization's annual budget - Only applies to Small Business and Hospitality)?*

\$

Please upload Organization's annual 2020 or most current year's Financial Statement.*

Choose File No file chosen

22. Complete and upload Line-Item Budget Workbook for your project. (you must submit Line-Item Budget Workbook in order to apply).

23. Acknowledge your project's requested ARPA funds are for a one-time capital investment and does not include on-going operating expenses.

24. Pick Yes or No if you have requested funding for this project through any other City, State, or Federal process.

- a. If you pick Yes, this will give you two additional boxes to enter the requested amount and further explain.

Has this project been submitted through any other City, State, or Federal funding process?*

☒ Yes
☐ No

If this project has been submitted through any other City, State, or Federal funding process, what is the requested amount? (Line-Item Budget Worksheet - cell C12)*

\$

If this project has been submitted through any other City, State, or Federal funding process, please describe the funding source and funding details.*

25. Pick Yes or No if you have private or organizational funding towards your project.

- a. If you pick Yes, this will give you two additional boxes to enter the requested amount and further explain.

Does this project have private or organizational funding?*

☒ Yes
☐ No

If this project has private or organizational funding, what is the amount? (Line-Item Budget Worksheet – cell D12)*

\$

If this project has private or organizational funding, please describe the funding source and funding details.*

Two red arrows point to the 'Yes' radio button and the text input area for funding details.

26. Pick Yes or No if you have in-kind contributions towards your project.

- a. If you pick Yes, this will give you two additional boxes to enter the requested amount and further explain.

Does this project have in-kind contributions?*

☒ Yes
☐ No

If this project has in-kind contributions, what is the amount? (Line-Item Budget Worksheet – cell E12)*

\$

If this project has in-kind contributions, please describe the funding source and funding details.*

Two red arrows point to the 'Yes' radio button and the text input area for funding details.

27. Pick one funding requirement for your project. Up front ARPA funding or Reimbursement of ARPA funding.

Does your project require up front ARPA grant funding, or will your organization need reimbursed for the ARPA funding?*

☐ Require up front ARPA grant funding
☐ Require reimbursement of ARPA funding

A red arrow points to the first radio button option.

28. Pick Yes or No if your project will result in future benefits.

a. If you pick Yes, this will give you an additional box to enter the estimated amount.

Will this project result in future benefits? i.e. new revenue and current expense reduction.*

☒ Yes
☐ No

If this project will result in future benefits, what is the estimated total amount?*

\$

29. Pick Yes or No if your project will result in any social impacts.

b. If you pick Yes, this will give you **five** additional boxes to rate different social impacts.

i. Rate each social impact on a scale of 1 to 5 with 1 being the least and 5 being the most.

ii. If you rate other social impact, you will need to further explain.

Will this project result in any future social impacts?*

☒ Yes
☐ No

If this project will result in future social impacts, please select how much impact it will have on improved neighborhood safety.*

☐ 5
☐ 4
☐ 3
☐ 2
☐ 1

5 = large impact, 1 = small impact.

If this project will result in future social impacts, please select how much impact it will have on other areas not listed above.*

☐ 5
☐ 4
☐ 3
☐ 2
☐ 1

5 = large impact, 1 = small impact.

If this project will result in future social impacts on areas not listed above, please explain.*

30. Describe specific outcomes and accomplishments your project/program will achieve.

31. Upload required documentations by clicking Choose File for each of the following.

Documentation

Ohio Secretary of State Business Filing – Certificate of Good Standing*

No file chosen

Previous year federal business tax return (2020 if filed or 2019 if last year's filing has not been completed)*

No file chosen

Most recent audit or certified financial statements for the most recent fiscal year*

No file chosen

Any relevant information regarding the project/program that was proposed

No file chosen

Detailed budget for the project, include all proposed expenses related to your project*

No file chosen

32. Check receive an email copy of this form and provide your email address.

33. Click Submit.

→ ☒ Receive an email copy of this form.

Email address

This field is not part of the form submission.

Important Application Navigation Notes:

If you need Customer Service to assist you, the Submission ID, located at the top of each application page is what you will need to provide so that they can look at your application in process.

A screenshot of a web form element. It features a label "Submission ID*" in green text. Below the label is a light gray rectangular input field containing the text "YQi3gtLz9". A red oval is drawn around the text in the field. Below the field, there is a line of text: "Please use this ID to refer to your submission." A red arrow originates from the left side of the page and points directly to the red oval.

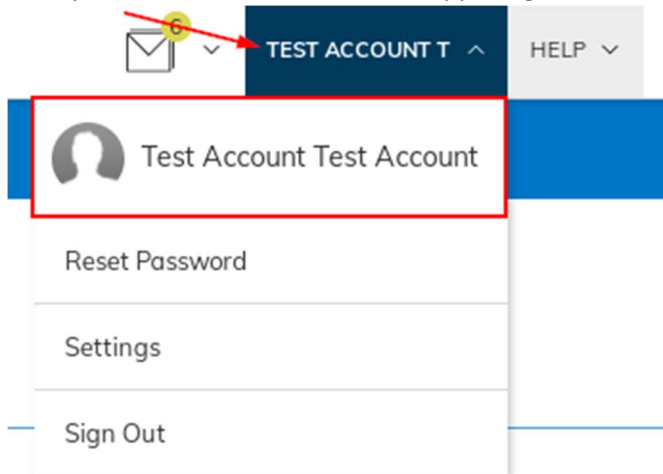
Submission ID is ONLY generated upon successful application submission.

If you decide to edit your submitted application, you will not be able to change NOFO category.

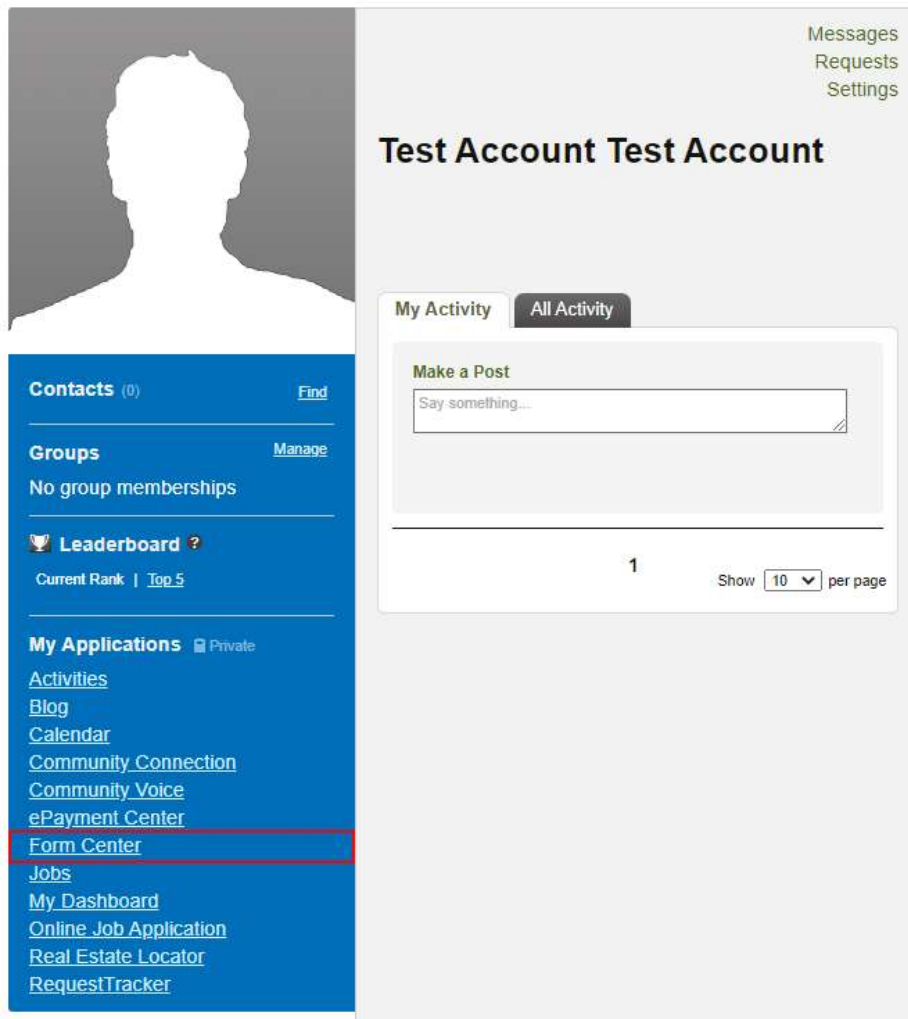
Please DO NOT mail your application.

Accessing your Submitted Forms

1. Navigate to <https://www.daytonohio.gov> in your web browser and sign into your account
2. Click your "Account's name" in the upper right corner and then click your name




3. On your "Account page", click "Form Center" under "My Applications" on the left (in the blue bar)



Editing and Re-submitting an Existing Form

1. Use the steps above to view all of your submitted forms
2. Click any of the forms listed under “Submitted Forms”




Home > Form Center



Form Center

[My Forms](#)

Submitted Forms

Date Submitted	Form	Description
 9/16/2021	Testing	
 9/16/2021	Testing	
 9/16/2021	Testing	

3. Click the “Save Progress” button to the at the upper right of the form preview

Home > Form Center



Form Center

[My Forms](#)

Search Forms:

Testing

[Save Progress](#)

Address

City **State**

4. Edit the fields you need to and then click the “Submit” button at the bottom when you’re ready to re-submit

Note: You will need to re-upload any attachments from your original submission.